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| Chapter you are filing under: | |
|-------------------------------|---------------------------------------|
| ☐ Chapter 7 | |
| ☐ Chapter 11 | |
| ☐ Chapter 12 | |
| ■ Chapter 13 | ☐ Check if this is an amended filing |
| | ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | rt 1: | Identify Yourself | | |
|-----|--------------------|---|--|---|
| | | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | You | r full name | | |
| | your | e the name that is on government-issued are identification (for | Rafael First name | First name |
| | | mple, your driver's use or passport). | Middle name | Middle name |
| | iden | g your picture tification to your ting with the trustee. | Orozco Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| 2. | | other names you have d in the last 8 years | | |
| | | de your married or den names. | | |
| 3. | you num Indi | y the last 4 digits of r Social Security aber or federal vidual Taxpayer utification number | xxx-xx-2431 | |

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Debtor 1 Rafael Orozco Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|--|--|--|---|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs. Business name(s) EINs | ☐ I have not used any business name or EINs. Business name(s) EINs |
| 5. | Where you live | 44 Jackson Street New Rochelle, NY 10801 Number, Street, City, State & ZIP Code Westchester County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code | If Debtor 2 lives at a different address: Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. Number, P.O. Box, Street, City, State & ZIP Code |
| 6. Why you are choosing this district to file for bankruptcy | | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) |

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| Debtor 1 | Rafael Orozco | Pg 3 of 42 | Case number (if known) | |
|----------|---|------------|------------------------|--|
| Port 2: | Tall the Court About Your Bankruptey Case | | | |

| about how you may pay. Typically, if you are paying the fee you order. If your attorney is submitting your payment on your behal a pre-printed address. I need to pay the fee in installments. If you choose this option The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option but is not required to, waive your fee, and may do so only if you applies to your family size and you are unable to pay the fee in the Application to Have the Chapter 7 Filing Fee Waived (Official Yes.) No. | with the clerk's office in your local court for more details irself, you may pay with cash, cashier's check, or money if, your attorney may pay with a credit card or check with a, sign and attach the <i>Application for Individuals to Pay</i> only if you are filing for Chapter 7. By law, a judge may, r income is less than 150% of the official poverty line that installments). If you choose this option, you must fill out |
|--|---|
| Chapter 7 | only if you are filing for Chapter 7. By law, a judge may, r income is less than 150% of the official poverty line that installments). If you choose this option, you must fill out |
| Chapter 12 Chapter 13 Chapter 13 | only if you are filing for Chapter 7. By law, a judge may, r income is less than 150% of the official poverty line that installments). If you choose this option, you must fill out |
| Chapter 13 | only if you are filing for Chapter 7. By law, a judge may, r income is less than 150% of the official poverty line that installments). If you choose this option, you must fill out |
| 8. How you will pay the fee I will pay the entire fee when I file my petition. Please check about how you may pay. Typically, if you are paying the fee you order. If your attorney is submitting your payment on your behal a pre-printed address. I need to pay the fee in installments. If you choose this option The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option but is not required to, waive your fee, and may do so only if you applies to your family size and you are unable to pay the fee in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103A). No. | only if you are filing for Chapter 7. By law, a judge may, r income is less than 150% of the official poverty line that installments). If you choose this option, you must fill out |
| about how you may pay. Typically, if you are paying the fee you order. If your attorney is submitting your payment on your behal a pre-printed address. Ineed to pay the fee in installments. If you choose this option The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option but is not required to, waive your fee, and may do so only if you applies to your family size and you are unable to pay the fee in the Application to Have the Chapter 7 Filing Fee Waived (Official Ports of New York (White Plains) Yes. | only if you are filing for Chapter 7. By law, a judge may, r income is less than 150% of the official poverty line that installments). If you choose this option, you must fill out |
| □ I need to pay the fee in installments. If you choose this option The Filing Fee in Installments (Official Form 103A). □ I request that my fee be waived (You may request this option but is not required to, waive your fee, and may do so only if you applies to your family size and you are unable to pay the fee in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103A). □ No. □ Yes. Southern District of New York(White Plains) When When District District When When When District When District New York (White Plains) When When District District When District When District | only if you are filing for Chapter 7. By law, a judge may, r income is less than 150% of the official poverty line that installments). If you choose this option, you must fill out |
| □ I request that my fee be waived (You may request this option but is not required to, waive your fee, and may do so only if you applies to your family size and you are unable to pay the fee in the Application to Have the Chapter 7 Filing Fee Waived (Official Plants) 9. Have you filed for bankruptcy within the last 8 years? □ No. □ Yes. Southern District of New York(White Plains) □ District □ District □ District □ District □ When □ No □ Yes. 10. Are any bankruptcy cases pending or being filed by a spouse who is not filling this case with you, or by a business partner, or by an affiliate? □ Debtor □ Debtor | r income is less than 150% of the official poverty line that installments). If you choose this option, you must fill out |
| but is not required to, waive your fee, and may do so only if you applies to your family size and you are unable to pay the fee in the Application to Have the Chapter 7 Filing Fee Waived (Official Plants) 9. Have you filed for bankruptcy within the last 8 years? Southern District of New York(White Plains) District District When When No cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? Debtor | r income is less than 150% of the official poverty line that installments). If you choose this option, you must fill out |
| 9. Have you filed for bankruptcy within the last 8 years? Southern District of New York(White Plains) District Distric | |
| bankruptcy within the last 8 years? Yes. Southern District of New York(White Plains) District District District District No Cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? Debtor | |
| New York(White Plains) When 6/02/16 District District New York(White Plains) When When When When When When When To a spouse who is not filing this case with you, or by a business partner, or by an affiliate? Debtor | |
| District Plains) When 6/02/16 District When No cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? District Plains) When 6/02/16 When Plains) When District When District When District Debtor | |
| District When District When No cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? District District District When No Pes. Debtor | Case number 16-22763-rdd |
| District District No No rases pending or being filed by a spouse who is not filling this case with you, or by a business partner, or by an affiliate? Debtor | |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? Debtor | Case number Case number |
| cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? Debtor | Case number |
| filed by a spouse who is Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor | |
| | |
| District When | Relationship to you |
| | Case number, if known |
| Debtor | Relationship to you |
| District When | Case number, if known |
| 11. Do you rent your No. Go to line 12. | |
| residence? Yes. Has your landlord obtained an eviction judgment against | |
| □ No. Go to line 12. | you? |
| Yes. Fill out <i>Initial Statement About an Eviction Ju</i> this bankruptcy petition. | you? |

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Main Document Pg 4 of 42 Rafael Orozco Debtor 1 Case number (if known) Report About Any Businesses You Own as a Sole Proprietor Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is ☐ Yes.

alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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Debtor 1 Rafael Orozco

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Deb | tor 1 Rafael Orozco | | | | Case number (| if known) | | |
|------|--|--|--|--|--|--|--|--|
| Part | 6: Answer These Quest | ions for Re | oorting Purposes | | | | | |
| 16. | What kind of debts do you have? | | 6a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "in individual primarily for a personal, family, or household purpose." | | | | | |
| | | 1 | ☐ No. Go to line 16b. | | | | | |
| | | I | Yes. Go to line 17. | | | | | |
| | | | Are your debts primarily be money for a business or inve | | | | | |
| | | | ☐ No. Go to line 16c. | | | | | |
| | | | ☐ Yes. Go to line 17. | | | | | |
| | | 16c. | State the type of debts you o | owe that are not consumer | debts or business | debts | | |
| 17. | Are you filing under Chapter 7? | ■ No. | am not filing under Chapter | 7. Go to line 18. | | | | |
| | Do you estimate that after any exempt property is excluded and after any exempt property is excluded and are paid that funds will be available to distribute to unsecured creditors? | | | | ty is excluded and administrative expenses | | | |
| | administrative expenses | excluded and ive expenses | | | | | | |
| | are paid that funds will be available for | | | | | | | |
| | distribution to unsecured creditors? | | | | | | | |
| 18. | How many Creditors do | 1-40 | | □ 1.000-5.000 | | □ 25.001-50.000 | | |
| | you estimate that you owe? | ☐ 50-99 | | ☐ 5001-10,000 | | 5 0,001-100,000 | | |
| | owe: | 100-199 | | □ 10,001-25,000 | | ☐ More than100,000 | | |
| | | 200-999 | 9 | | | | | |
| 19. | How much do you | □ \$0 - \$50 | | □ \$1,000,001 - \$1 | | ☐ \$500,000,001 - \$1 billion | | |
| | estimate your assets to be worth? | | - \$100,000 | □ \$10,000,001 - \$ | | □ \$1,000,000,001 - \$10 billion | | |
| | | | 01 - \$500,000 | □ \$50,000,001 - \$ □ \$100,000,001 - | | ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion | | |
| | | □ \$500,00 | 01 - \$1 million | - \$100,000,001 - | \$300 IIIIII0II | Li More than \$50 billion | | |
| 20. | How much do you | □ \$0 - \$50 | 0,000 | □ \$1,000,001 - \$1 | 0 million | ☐ \$500,000,001 - \$1 billion | | |
| | estimate your liabilities to be? | | 1 - \$100,000 | □ \$10,000,001 - \$ | | □ \$1,000,000,001 - \$10 billion | | |
| | | _ |)1 - \$500,000 | □ \$50,000,001 - \$ | | \$10,000,000,001 - \$50 billion | | |
| | | \$500,00 | 01 - \$1 million | □ \$100,000,001 - | \$500 million | ☐ More than \$50 billion | | |
| Part | 7: Sign Below | | | | | | | |
| For | you | I have exa | mined this petition, and I dec | clare under penalty of perj | ury that the informa | tion provided is true and correct. | | |
| | | | | | | nder Chapter 7, 11,12, or 13 of title 11, ose to proceed under Chapter 7. | | |
| | | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). | | | | | | |
| | | I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. | | | | | | |
| | | | case can result in fines up | | | property by fraud in connection with a ars, or both. 18 U.S.C. §§ 152, 1341, 1519, | | |
| | | Rafael O | rozco | Si | gnature of Debtor 2 | | | |
| | | Signature | of Debtor 1 | | | | | |
| | | Executed of | | E> | recuted on | | | |
| | | | MM / DD / YYYY | | MM / I | DD / YYYY | | |

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Debtor 1 Rafael Orozco Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Todd S. Cushner | Date | November 27, 2019 |
|--|---------------|-----------------------|
| Signature of Attorney for Debtor | | MM / DD / YYYY |
| Todd S. Cushner TC9658 | | |
| Printed name | | |
| Cushner & Associates, P.C. | | |
| 399 Knollwood Road Suite 205 | | |
| White Plains, NY 10603 | | |
| Number, Street, City, State & ZIP Code | | |
| Contact phone (914) 600-5502 | Email address | todd@cushnerlegal.com |
| TC9658 NY | | |
| Rar number & State | | |

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| Fill in this information to identify your case: | | | | | | | | |
|---|--------------------------|--|--|--|--|--|--|--|
| Rafael Orozco | | | | | | | | |
| First Name | Middle Name | Last Name | | | | | | |
| | | | | | | | | |
| First Name | Middle Name | Last Name | | | | | | |
| nkruptcy Court for the: | SOUTHERN DISTRICT | OF NEW YORK | | | | | | |
| | | | | | | | | |
| | | | | ☐ Check if this is an | | | | |
| | | | | amended filing | | | | |
| | Rafael Orozco First Name | Rafael Orozco First Name Middle Name First Name Middle Name | Rafael Orozco First Name Middle Name Last Name First Name Middle Name Last Name | Rafael Orozco First Name Middle Name Last Name First Name Middle Name Last Name | | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Par | t 1: Summarize Your Assets | | |
|-----|--|-------------|---------------------------|
| | | | assets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 452,000.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 13,240.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 465,240.00 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | liabilities nt you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 691,121.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 312.00 |
| | Your total liabilities | \$ | 691,433.00 |
| Par | t3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 6,457.00 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 5,867.00 |
| Par | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other so | chedules. |
| 7. | ■ Yes What kind of debt do you have? | | |

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Pg 9 of 42 Case number (if known) Debtor 1 Rafael Orozco

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

7,638.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on Schedule E/F, copy the following: | Total claim | |
|---|-------------|------|
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as | · | 0.00 |
| priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |
| og. 19tan / tad imod da amodgir of. | | 0.00 |

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| | | | | Pa 10 of 42 | | - | |
|--|--|------------------|-----------|--|-----------------|--|--|
| Fill in this informat | ion to identify | your case and th | is filing | j : | | | |
| Debtor 1 | Rafael Orozo | :0 | | | | | |
| | First Name | Middle | Name | Last Name | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle | Name | Last Name | | | |
| United States Bankr | uptcy Court for | the: SOUTHER | N DIST | RICT OF NEW YORK | | | |
| 0 | | | | | | | _ |
| Case number | | | | | | | Check if this is an amended filing |
| | | | | | | | |
| Official Forn | n 106A/B |) - | | | | | |
| Schedule | A/B: Pr | operty | | | | | 12/15 |
| | ch Residence, Bu | | | Estate You Own or Have an Interest In ence, building, land, or similar property? | | | |
| No. Go to Part 2. ■ Yes. Where is the | e property? | | | | | | |
| 1.1 | 24 4 | | What | is the property? Check all that apply | | | |
| | 44 Jackson Street Street address, if available, or other description | | | the amount | | | ims or exemptions. Put I claims on Schedule D: |
| | | | | Condominium or cooperative | | Creditors Who Have Claims Secured by Property. | |
| | | | | Manufactured or mobile home | Current | due of the | Command value of the |
| New Rochell | | 10801-0000 | | Land | Current va | perty? | Current value of the portion you own? |
| City | State | ZIP Code | | Investment property Timeshare | | 52,000.00 be nature of w | \$452,000.00 our ownership interest |
| | | | | Other | (such as f | | ancy by the entireties, or |
| | | | Who | has an interest in the property? Check one Debtor 1 only | Fee Sim | • | |
| Westchester | | | | | | | |
| County | | | | | ☐ Chec | k if this is com | munity property |
| | | | Othe | At least one of the debtors and another rinformation you wish to add about this item | (see in | structions) | ,, , , |
| | | | | erty identification number: | ii, sucii as ic | , cai | |
| | | | 2 Fa | mily House Used as Debtors Resi | dence | | |
| | | | | | | | |
| | | | | your entries from Part 1, including any r here | | | \$452,000.00 |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

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Rafael Orozco

Case number (if known)

| Debi | Naiaei Olozco | | | |
|---------------|--|---|----------------------------|---|
| 3. C a | rs, vans, trucks, tractors, sport utility ve | ehicles, motorcycles | | |
| _ | | | | |
| | | | | |
| | Yes | | | |
| | | | Do not doduct cooured | claims or exemptions. Put |
| 3.1 | Make: Nissan | Who has an interest in the property? Check one | | red claims on <i>Schedule D:</i> |
| | Model: Frontier | Debtor 1 only | Creditors Who Have Cla | aims Secured by Property. |
| | Year: 2008 | Debtor 2 only | Current value of the | Current value of the |
| | Approximate mileage: 140000 Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | -Owned Full and Clear | At least one of the debtors and another | | |
| | -owned I un and Glear | ☐ Check if this is community property | \$5,275.00 | \$5,275.00 |
| | | (see instructions) | | |
| | | | | |
| 3.2 | Make: Honda | Who has an interest in the property? Check one | | claims or exemptions. Put red claims on Schedule D: |
| | Model: CR-V | Debtor 1 only | | aims Secured by Property. |
| | Year: 1999 | Debtor 2 only | Current value of the | Current value of the |
| | Approximate mileage: 170000 | ☐ Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | Other information: | ☐ At least one of the debtors and another | | |
| | -Owned Full and Clear | - | \$1,982.00 | \$1,982.00 |
| | -Operated by Debtors Spouse | ☐ Check if this is community property (see instructions) | φ1,902.00 | Ψ1, 3 02.00 |
| | | | | |
| 5 A | dd the dollar value of the portion you ov | wn for all of your entries from Part 2, including an | ny entries for | \$7,257.00 |
| .pa | ages you have attached for Part 2. Write | that number here | => | Ψ1,231.00 |
| Part ' | Describe Your Personal and Household I | toms | | |
| | ou own or have any legal or equitable in | | | Current value of the |
| БО у | ou own or have any legal or equitable in | nerest in any of the following hems: | | portion you own? Do not deduct secured |
| | | | | claims or exemptions. |
| | usehold goods and furnishings | 11 19 1 | | • |
| | xamples: Major appliances, furniture, linens No | s, cnina, kitchenware | | |
| _ | | | | |
| | Yes. Describe | | | |
| | Household God | ods and Furnishings | | \$2,500.00 |
| | | <u> </u> | | |
| , EI | and the mine | | | |
| | ectronics xamples: Televisions and radios: audio. vic | deo, stereo, and digital equipment; computers, printe | rs. scanners: music collec | ions: electronic devices |
| | including cell phones, cameras, r | | ., | |
| | No | | | |
| | Yes. Describe | | | |
| | [| | | |
| | 2 Televisions, | 1 Alarm Clock,1 Fax Machine, 1 Cellphone | | 44 500 00 |
| | | | | \$1,500.00 |
| | | | | \$1,500.00 |
| F | ellectibles of value | | | · |
| _ | xamples: Antiques and figurines; paintings, | , prints, or other artwork; books, pictures, or other art | objects; stamp, coin, or b | · |
| | xamples: Antiques and figurines; paintings, other collections, memorabilia, co | | objects; stamp, coin, or b | · |
| | xamples: Antiques and figurines; paintings, | | objects; stamp, coin, or b | |

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| Debtor 1 | Rafael Orozco | 1 9 12 01 42 | Case number (if known) | |
|---|---|--|---------------------------------|--|
| e. Equipn | nent for sports and hobbies | | | |
| _ | oles: Sports, photographic, exercise, an musical instruments | nd other hobby equipment; bicycles, pool table | es, golf clubs, skis; canoes an | d kayaks; carpentry tools; |
| ■ No □ Yes | . Describe | | | |
| 0. Firear | | | | |
| - | pples: Pistols, rifles, shotguns, ammunit | tion, and related equipment | | |
| ☐ Yes | . Describe | | | |
| 11. Cloth e <i>Exam</i> □ No | | pats, designer wear, shoes, accessories | | |
| | . Describe | | | |
| | Used Clothing | | | \$1,000.00 |
| ☐ No | | ry, engagement rings, wedding rings, heirloor | n jewelry, watches, gems, gol | d, silver |
| | 1 Necklace | | | \$75.00 |
| | | | | |
| - | arm animals oples: Dogs, cats, birds, horses | | | |
| ☐ Yes | . Describe | | | |
| 14. Any o | ther personal and household items | you did not already list, including any hea | Ith aids you did not list | |
| ■ No □ Yes | . Give specific information | | | |
| | | s from Part 3, including any entries for pag | ges you have attached | \$5,075.00 |
| _ | | | L | |
| | escribe Your Financial Assets wn or have any legal or equitable in | terest in any of the following? | | Current value of the |
| · | , . | , | | portion you own? Do not deduct secured claims or exemptions. |
| | aples: Money you have in your wallet, in | n your home, in a safe deposit box, and on ha | and when you file your petition | |
| □ No | | | | |
| – 168 | | | | |
| | | | Cash on Hand | \$100.00 |
| | | ncial accounts; certificates of deposit; shares i accounts with the same institution, list each. | n credit unions, brokerage ho | uses, and other similar |
| □ No | , | · | | |
| Yes | | Institution name: | | |
| | 17.1 Checkin | g vv-5309 Bank of America | | \$808.00 |

| 18. | Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts | |
|-----|---|---|
| | ■ No □ Yes Institution or issuer name: | |
| 19. | Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in a joint venture | an LLC, partnership, and |
| | ■ No ☐ Yes. Give specific information about them Name of entity: % of ownership: | |
| 20. | Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. | |
| | ■ No □ Yes. Give specific information about them Issuer name: | |
| 21. | Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans No | s |
| | ☐ Yes. List each account separately. Type of account: Institution name: | |
| 22. | Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, | or others |
| | ■ No □ Yes | |
| 23. | Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No | |
| | Yes Issuer name and description. | |
| 24. | Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). | n. |
| | Yes Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): | |
| 25. | Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercis No | able for your benefit |
| | Yes. Give specific information about them | |
| 26. | Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No | |
| | ☐ Yes. Give specific information about them | |
| 27. | Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No | |
| | ☐ Yes. Give specific information about them | |
| M | oney or property owed to you? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds owed to you ■ No | |
| | Yes. Give specific information about them, including whether you already filed the returns and the tax years. | |

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years......

Official Form 106A/B Schedule A/B: Property page 4

19-24079-shl Doc 1 Filed 11/27/19 Entered 11/27/19 15:38:57 Main Document Pg 14 of 42 **Rafael Orozco** Case number (if known) Debtor 1 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information...... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation. Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$908.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

■ No

☐ Yes. Give specific information.......

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Case number (if known) Debtor 1 Rafael Orozco 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$452,000.00 Part 2: Total vehicles, line 5 \$7,257.00 57. Part 3: Total personal and household items, line 15 \$5,075.00 Part 4: Total financial assets, line 36 58. \$908.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total \$13,240.00 \$13,240.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$465,240.00

Official Form 106A/B Schedule A/B: Property page 6

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| Fill in this inform | nation to identify your | case: | | | |
|---------------------|-------------------------|-------------------|-------------|---|------------------------------------|
| Debtor 1 | Rafael Orozco | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | nkruptcy Court for the: | SOUTHERN DISTRICT | OF NEW YORK | | |
| Case number _ | | | | _ | 0 |
| (If Known) | | | | _ | check if this is an amended filing |
| Case number | | | | | Check if this is an amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Current value of the portion you own | Amount of the exemption you claim | | Specific laws that allow exemption |
|---|-----------------------------------|---|---|
| Copy the value from Schedule A/B | Che | ck only one box for each exemption. | |
| \$5,275.00 | | \$2,568.00 | Debtor & Creditor Law § 282(1) |
| | | 100% of fair market value, up to any applicable statutory limit | 202(1) |
| \$1,982.00 | | \$1,982.00 | Debtor & Creditor Law § 282(1) |
| | | 100% of fair market value, up to any applicable statutory limit | |
| \$1,500.00 | | \$1,800.00 | NYCPLR § 5205(a)(5) |
| | | 100% of fair market value, up to any applicable statutory limit | |
| \$1,000.00 | | \$1,500.00 | NYCPLR § 5205(a)(5) |
| | | 100% of fair market value, up to any applicable statutory limit | |
| \$75.00 | | \$75.00 | NYCPLR § 5205(a)(6) |
| | | 100% of fair market value, up to any applicable statutory limit | |
| | \$1,500.00 | \$1,982.00 \$1,000.00 \$1,000.00 \$75.00 | Copy the value from Schedule A/B \$5,275.00 \$2,568.00 □ 100% of fair market value, up to any applicable statutory limit \$1,982.00 □ 100% of fair market value, up to any applicable statutory limit \$1,500.00 □ 100% of fair market value, up to any applicable statutory limit \$1,500.00 □ 100% of fair market value, up to any applicable statutory limit \$1,000.00 □ 100% of fair market value, up to any applicable statutory limit \$75.00 □ 100% of fair market value, up to any applicable statutory limit |

Doc 1 Filed 11/27/19 Entered 11/27/19 15:38:57 19-24079-shl Main Document Pg 17 of 42 Debtor 1 Rafael Orozco Case number (if known) Brief description of the property and line on Schedule A/B that lists this property Current value of the Amount of the exemption you claim Specific laws that allow exemption portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Cash on Hand** NYCPLR § 5205(a)(9) \$100.00 \$100.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit

| 3. | Are you claiming a homestead exemption of more than \$170,350? (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.) |
|----|--|
| | (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.) |
| | ■ No |
| | ☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? |
| | □ No |
| | ☐ Yes |

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|--|--|---|----------------|--|---|-------------------|
| Fill in this inform | nation to identify you | ur case: | | | | |
| Debtor 1 | Rafael Orozco | | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | - | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Ba | nkruptcy Court for the | SOUTHERN DISTRICT OF NEW | / YORK | | | |
| Coco number | | | | | | |
| Case number (if known) | | | | | ☐ Check | if this is an |
| | | | | | _ | led filing |
| | | | | | | |
| Official Forn | n 106D | | | | | |
| Schedule | D: Creditors | s Who Have Claims S | ecure | d by Property | | 12/15 |
| | e Additional Page, fill it | If two married people are filing together out, number the entries, and attach it to | | | | |
| 1. Do any creditors | have claims secured b | y your property? | | | | |
| ☐ No. Check | this box and submit t | his form to the court with your other s | chedules. Y | ou have nothing else to | report on this form. | |
| Yes. Fill in | all of the information | below. | | | | |
| Part 1: List A | II Secured Claims | | | | | |
| | | more than one secured claim, list the credi | tor senarately | Column A | Column B | Column C |
| for each claim. If m | nore than one creditor has | s a particular claim, list the other creditors i | | Amount of claim | Value of collateral | Unsecured |
| much as possible, l | ist the claims in alphabet | ical order according to the creditor's name. | | Do not deduct the value of collateral. | that supports this claim | portion If any |
| 2.1 MTGLQ o | | Describe the property that secures the | | \$691,121.00 | \$452,000.00 | \$239,121.00 |
| Creditor's Name | е | 44 Jackson Street New Roche | elle, NY | | | |
| Mcabe We | • | 10801 Westchester County 2 Family House Used as Debt | ore | | | |
| Conway L | | Residence | .015 | | | |
| 145 Hugu 210 | enot St , Suite | As of the date you file, the claim is: Ch | neck all that | | | |
| - | nelle, NY 10801 | apply. Contingent | | | | |
| | t, City, State & Zip Code | ☐ Unliquidated | | | | |
| | | ☐ Disputed | | | | |
| Who owes the de | ebt? Check one. | Nature of lien. Check all that apply. | | | | |
| Debtor 1 only | | An agreement you made (such as mo | ortgage or se | cured | | |
| Debtor 2 only | | car loan) | | | | |
| Debtor 1 and De | • | ☐ Statutory lien (such as tax lien, mech | anic's lien) | | | |
| _ | he debtors and another | ☐ Judgment lien from a lawsuit | | | | |
| ☐ Check if this cl community de | | Other (including a right to offset) | First Mtg | | | |
| | | | | | | |
| Date debt was inc | urred | Last 4 digits of account numbe | er <u>4318</u> | | | |
| | | | | | | |
| Add the dollar va | alue of your entries in C | Column A on this page. Write that number | or here | \$691,121 | 00 | |
| | = | the dollar value totals from all pages. | or riore. | | | |
| Write that numb | er here: | | | \$691,121 | .00 | |
| Part 2: List Oth | hers to Be Notified fo | or a Debt That You Already Listed | | | | |
| Use this page only trying to collect fro than one creditor | y if you have others to k | oe notified about your bankruptcy for a c owe to someone else, list the creditor in t you listed in Part 1, list the additional c | Part 1, and | then list the collection age | ncy here. Similarly, if | you have more |
| Name, Num McCabe | ber, Street, City, State & Weisberg Conway | Zip Code | | ich line in Part 1 did you ent | | |
| Suite 201 | enot Street I0 :helle. NY 10801 | | Last 4 | digits of account number | <u>2018 </u> | |

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| Debtor 1 | Rafael Orozco | | | Case number (if known) | |
|----------|---|-------------|-----------|---|--|
| | First Name | Middle Name | Last Name | _ | |
| SI Po | ame, Number, Street, City, hellpoint Mortgage O Box 740039 incinnati, OH 45274 | • | | On which line in Part 1 did you enter th Last 4 digits of account number | |

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| | | | caso. | | | | | | |
|---------------------------------|--|--|--|--|---|--|--------------------------------|--|-----------------------|
| Fill in | this inform | ation to identify your | case. | | | | | | |
| Debto | r 1 | Rafael Orozco | | | | | | | |
| | | First Name | Middle Nam | ne | Last Name | | | | |
| Debto | r 2 | | | | | | | | |
| (Spouse | if, filing) | First Name | Middle Nam | ne | Last Name | | | | |
| United | l States Ban | kruptcy Court for the: | SOUTHERN [| DISTRICT OF N | NEW YORK | | | | |
| _ | | | | | | | | | |
| Case i | number | | | | | | | Check if this | ic an |
| (11 141041 | '' | | | | | | | amended filir | |
| | | | | | | | | amondou iiii | 9 |
| Offic | ial Form | 106E/F | | | | | | | |
| Sche | edule E | F: Creditors W | /ho Have L | Jnsecured | d Claims | | | 12 | /15 |
| e as c | omplete and | accurate as possible. Us | se Part 1 for credit | tors with PRIORI | ITY claims and I | Part 2 for creditors with NONPR | RIORITY cl | aims. List the | other party to |
| _ | No. Go to Pa | of Your PRIORITY Urrs have priority unsecure art 2. | | | | | | | |
| □ ■ 4. Lis | List All o any creditor No. You have Yes. st all of your | | cured claims agai part. Submit this for laims in the alpha | inst you? In to the court with | the creditor who | holds each claim. If a creditor I | | | |
| Part 2 3. Do 4. Lis untha | List All o any creditor No. You have Yes. st all of your secured claim | rs have nonpriority unset e nothing to report in this p nonpriority unsecured cl n, list the creditor separatel | cured claims agai part. Submit this for laims in the alpha ly for each claim. For | inst you? In to the court with the | the creditor who | | ns already i | ncluded in Part | 1. If more Page of |
| Part 2 3. Do 4. Lis un: tha Pa | List All o any creditor No. You have Yes. st all of your secured claim an one creditor rt 2. | e nothing to report in this p nonpriority unsecured cl n, list the creditor separatel or holds a particular claim, I | cured claims agai part. Submit this for laims in the alpha by for each claim. Fi list the other credite | inst you? Im to the court with Independent of the court | the creditor who ed, identify what t u have more than | holds each claim. If a creditor lype of claim it is. Do not list claim three nonpriority unsecured clair | ns already i | ncluded in Part ne Continuation | 1. If more Page of |
| Part 2 3. Do 4. Lis un: tha Pa | List All o any creditor No. You have Yes. st all of your secured claim an one creditor rt 2. Mabt - G | rs have nonpriority unset e nothing to report in this p nonpriority unsecured cl n, list the creditor separatel | cured claims agai part. Submit this for laims in the alpha by for each claim. Fi list the other credite | inst you? In to the court with the | the creditor who ed, identify what t u have more than | holds each claim. If a creditor lype of claim it is. Do not list claim | ns already i | ncluded in Part ne Continuation | 1. If more Page of |
| Part 2 3. Do 4. Lis un: tha Pa | List All any creditor No. You have Yes. st all of your secured claim an one creditor t 2. Mabt - G Nonpriority Attn: Ba | rs have nonpriority unser e nothing to report in this p nonpriority unsecured cl n, list the creditor separatel or holds a particular claim, I denesis Retail Creditor's Name nkruptcy | cured claims agai part. Submit this for laims in the alpha by for each claim. Fi list the other credito | inst you? I'm to the court with the court of the court o | the creditor who ed, identify what to the have more than count number | holds each claim. If a creditor lype of claim it is. Do not list claim three nonpriority unsecured clair 8476 Opened 09/19 Last Ac | ns already i ms fill out th | ncluded in Part ne Continuation | 1. If more Page of |
| Part 2 3. Do 4. Lis un: tha Pa | List All any creditor No. You have Yes. st all of your secured claim an one creditor t 2. Mabt - G Nonpriority Attn: Ba Po Box 4 | nonpriority unsecured classification in the property unsecured classification in the creditor separatel or holds a particular claim, I cenesis Retail Creditor's Name inkruptcy | cured claims agai part. Submit this for laims in the alpha by for each claim. Fi list the other credito | inst you? Im to the court with Independent of the court | the creditor who ed, identify what to the have more than count number | holds each claim. If a creditor lype of claim it is. Do not list claim three nonpriority unsecured clair | ns already i ms fill out th | ncluded in Part ne Continuation | 1. If more Page of |
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| Part 2 3. Do 4. Lis un: tha Pa | List All o any creditor No. You have Yes. st all of your secured claim an one creditor The Attn: Ba Po Box Beaverto Number Str Who incur Debtor | nonpriority unsecured classification in this property unsecured classification in the creditor separatel or holds a particular claim, I creditor's Name inkruptcy 4477 on, OR 97076 reet City State Zip Code red the debt? Check one. 1 only | cured claims againers. Submit this for laims in the alpha by for each claim. First the other creditors. | inst you? In to the court with the court and the cou | the creditor who ed, identify what to the have more than eccount number bt incurred? | holds each claim. If a creditor lype of claim it is. Do not list claim three nonpriority unsecured clair 8476 Opened 09/19 Last Ac 11/19 | ns already i ms fill out th | ncluded in Part ne Continuation | 1. If more Page of |
| Part 2 3. Do 4. Lis un: tha Pa | List All o any creditor No. You have Yes. St all of your secured claims an one creditor an one creditor at 2. Mabt - G Nonpriority Attn: Ba Po Box 4 Beavertc Number Str Who incur Debtor 2 Debtor 2 | nonpriority unsecured classifications of the debt? Check one. 1 and Debtor 2 only 1 and Debtor 2 only 1 and Debtor 2 only | cured claims againant. Submit this for laims in the alpha by for each claim. Flist the other creditors. | inst you? In to the court with the court and the cou | the creditor who ed, identify what to a have more than ecount number bt incurred? | holds each claim. If a creditor lype of claim it is. Do not list claim three nonpriority unsecured clair 8476 Opened 09/19 Last Ac 11/19 s: Check all that apply | ns already i ms fill out th | ncluded in Part ne Continuation | 1. If more Page of |
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| Part 2 3. Do 4. Lis un: tha Pa | List All o any creditor No. You have Yes. st all of your secured claim an one creditor rt 2. Mabt - G Nonpriority Attn: Ba Po Box 4 Beaverte Number Str Who incur Debtor Debtor At least Check idebt | nonpriority unsecured cl nonpriority unsecured cl n, list the creditor separatel or holds a particular claim, l Genesis Retail Creditor's Name nkruptcy 4477 on, OR 97076 reet City State Zip Code red the debt? Check one. 1 only 2 only 1 and Debtor 2 only one of the debtors and and if this claim is for a comi | cured claims againer. Submit this for laims in the alpha by for each claim. Filist the other creditors are considered by the content of the c | inst you? In to the court with the c | the creditor who ed, identify what i u have more than eccount number bbt incurred? u file, the claim i | holds each claim. If a creditor lype of claim it is. Do not list claim three nonpriority unsecured claim 8476 Opened 09/19 Last Ac 11/19 s: Check all that apply | ns already ins fill out the | ncluded in Part ne Continuation Total claim | 1. If more Page of |
| Part 2 3. Do 4. Lis un: tha Pa | List All o any creditor No. You have Yes. st all of your secured claim an one creditor rt 2. Mabt - G Nonpriority Attn: Ba Po Box A Beaverto Number Str Who incur Debtor At least Check idebt Is the claim | nonpriority unsecured cl nonpriority unsecured cl n, list the creditor separatel or holds a particular claim, l Genesis Retail Creditor's Name nkruptcy 4477 on, OR 97076 reet City State Zip Code red the debt? Check one. 1 only 2 only 1 and Debtor 2 only one of the debtors and and if this claim is for a comi | cured claims againer. Submit this for laims in the alpha by for each claim. First the other creditors the other creditors are considered as a constant of the | inst you? In to the court with the c | the creditor who ed, identify what i u have more than ecount number bt incurred? u file, the claim i energy out of a separating out of a separating on or profit-sharin | holds each claim. If a creditor lype of claim it is. Do not list claim three nonpriority unsecured clair 8476 Opened 09/19 Last Ac 11/19 s: Check all that apply d claim: ration agreement or divorce that g plans, and other similar debts | ns already ins fill out the | ncluded in Part ne Continuation Total claim | 1. If more Page of |

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

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Debtor 1 Rafael Orozco

Case number (if known)

| | | | | | Total Claim |
|-----------------------|-----|---|-----|----|-------------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | 6f. | Student loans | 6f. | \$ | Total Claim |
| Total | OI. | Student loans | OI. | ъ | 0.00 |
| claims from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 312.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 312.00 |

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| Fill in this infor | mation to identify your | case: | | |
|---------------------|--------------------------|-------------------|-------------|---------------------|
| Debtor 1 | Rafael Orozco | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | SOUTHERN DISTRICT | OF NEW YORK | |
| Case number | | | | |
| (if known) | | | | Check if this is an |
| | | | | amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company wit Name, Numb | h whom you have the er, Street, City, State and ZIP C | contract or lease | State what the contract or lease is for |
|-----|-----------|---------------------------|---|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | |
| 2.3 | <u> </u> | | Otato | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.4 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.5 | • | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| | Oity | | Oldic | | |

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| | | | Pa 23 of 42 | | |
|--------------------|--|-------------------------------|-----------------------|---|--|
| Fill in this i | nformation to identify your | case: | | | |
| Debtor 1 | Defect Overes | | | | |
| Depioi i | Rafael Orozco First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing | First Name | Middle Name | Last Name | | |
| United State | es Bankruptcy Court for the: | SOUTHERN DISTRICT | OF NEW YORK | | |
| Office Otate | 33 Dankruptcy Court for the. | OCCUPENT DIOTNO | OF INEW PORK | | |
| Case number | er | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| Official | Form 106U | | | | |
| | Form 106H | _ | | | |
| Schedı | ule H: Your Cod | ebtors | | | 12/15 |
| | | | | | |
| | and case number (if known) ou have any codebtors? (If | | | e as a codebtor. | |
| _ | | | | | |
| ■ No | | | | | |
| ☐ Yes | | | | | |
| Arizona _ | in the last 8 years, have you , California, Idaho, Louisiana, | | | | tates and territories include |
| No. C | Go to line 3. | | | | |
| ☐ Yes. | Did your spouse, former spou | use, or legal equivalent live | with you at the time? | | |
| in line 2 | 2 again as a codebtor only i 06D), Schedule E/F (Official | f that person is a guaran | tor or cosigner. Make | sure you have listed the | rith you. List the person shown creditor on Schedule D (Official hedule E/F, or Schedule G to fill |
| С | olumn 1: Your codebtor | | | Column 2: The credit | or to whom you owe the debt |
| Na | ame, Number, Street, City, State and Z | P Code | | Check all schedules t | hat apply: |
| 2.4 | | | | Cabadula D. Saa | |
| 3.1 N | ame | | | Schedule D, line | |
| | | | | ☐ Schedule E/F, line ☐ Schedule G, line | |
| | | | | ☐ Schedule G, line | |
| | umber Street | _ | | _ | |
| C | ity | State | ZIP Code | | |
| | | | | | |
| 3.2 | | | | ☐ Schedule D, line | |
| N | ame | <u> </u> | | ☐ Schedule E/F, line | |
| | | | | ☐ Schedule G, line | |
| N | umber Street | | | _ | |
| | ity | State | ZIP Code | | |

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| Fill | in this information to ic | dentify your ca | ase: | | | | |
|-------------|--|-------------------------------|----------------------------|---|---|--|--|
| De | btor 1 F | Rafael Oroz | co | | | | |
| 1 - | btor 2 | | | | | | |
| Un | ited States Bankruptcy | Court for the | : SOUTHERN DISTRIC | CT OF NEW YORK | | | |
| 1 | se number nown) | | | - | Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date: | | |
| 0 | fficial Form 1 | <u>06I</u> | | | MM / DD/ Y | YYY | |
| S | chedule I: Ye | our Inc | ome | | | 12/15 | |
| spo atta | ruse. If you are separated a separate sheet to | ated and you to this form. | r spouse is not filing w | ng jointly, and your spouse is li ith you, do not include informat onal pages, write your name an | ion about your spo | ouse. If more space is needed, known). Answer every question. | |
| 1. | Fill in your employi information. | ment | | Debtor 1 | Debtor 2 | or non-filing spouse | |
| | If you have more that attach a separate pa | | Employment status | ■ Employed | ■ Emple | pyed | |
| | information about ad | | | ☐ Not employed | ☐ Not e | mployed | |
| | employers. | | Occupation | Food Services | Cleanin | g Services | |
| | Include part-time, se self-employed work. | easonal, or | Employer's name | Iron Tomato LLC | Fratem | ale Associates Inc | |
| | Occupation may incl or homemaker, if it a | | Employer's address | 57 Mamaroneck Ave White Plains, NY 10601 | | th Buckhout St. Ste 105 on, NY 10533 | |
| | | | How long employed t | here? | | | |
| Pa | rt 2: Give Detail | ls About Mor | nthly Income | | | | |
| | imate monthly incomuse unless you are sep | | ate you file this form. If | you have nothing to report for any | line, write \$0 in the | space. Include your non-filing | |
| | ou or your non-filing spore space, attach a sepa | | | ombine the information for all emp | loyers for that perso | n on the lines below. If you need | |
| | | | | | For Debtor 1 | For Debtor 2 or non-filing spouse | |

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

- 3. Estimate and list monthly overtime pay.
- 4. Calculate gross Income. Add line 2 + line 3.

| filing spouse | | For Deptor 1 | | |
|---------------|-----|--------------|-----|----|
| 655.00 | \$ | 4,983.00 | \$ | 2. |
| 0.00 | +\$ | 0.00 | +\$ | 3. |
| 655.00 | \$ | 4,983.00 | \$ | 4. |

Official Form 106l Schedule I: Your Income page 1

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| 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined monthly income. 13. Do you expect an increase or decrease within the year after you file this form? | Debtor | 1 _ | Rafael Orozco | - | C | Case nu | umber (<i>if knowr</i> | n) _ | | | | |
|---|--------------|----------------------------------|--|------|------------|-------------|-------------------------|------------|-------|----------|---------------------|----------|
| See Tax, Medicare, and Social Security deductions 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Noturity deductions 5c. Noturity despayments of retirement plans 5c. Noturity despayments of retirement fund loans 5c. Noturity despayments of retirements fund loans 5d. Not retire deductions. Specify: 6d. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6d. \$ 1,020.00 \$ 10.00 5d. Do despayment for deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6d. \$ 1,020.00 \$ 116.00 7d. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7d. \$ 3,963.00 \$ 539.00 8d. Not income from rental property and from operating a business, profession, or farm Altach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly not income. 8d. Not income from rental property and business, and the total monthly not income. 8d. \$ 1,955.00 \$ 0.00 8d. \$ 0.00 \$ | | | | | | For D | Debtor 1 | | | | | |
| 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5b. \$ 0.00 \$ 0.00 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ 0.00 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ 0.00 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ 0.00 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ 0.00 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ 0.00 5c. Voluntary contributions for retirement fund loans 5c. \$ 0.00 \$ 0.00 5c. Voluntary contributions for retirement fund loans 5c. \$ 0.00 \$ 0.00 5c. Voluntary contributions for retirement fund loans 5c. \$ 0.00 \$ 0.00 5c. Voluntary contributions for retirement fund loans 5c. \$ 0.00 \$ 0.00 5c. Voluntary contributions for retirement fund fund for retirement fund fund fund fund fund fund fund fund | C | opy | / line 4 here | 4. | | \$ | 4,983.0 | 0 | | | | _ |
| 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5b. \$ 0.00 \$ 0.00 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ 0.00 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ 0.00 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ 0.00 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ 0.00 5c. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ 0.00 5c. Voluntary contributions for retirement fund loans 5c. \$ 0.00 \$ 0.00 5c. Voluntary contributions for retirement fund loans 5c. \$ 0.00 \$ 0.00 5c. Voluntary contributions for retirement fund loans 5c. \$ 0.00 \$ 0.00 5c. Voluntary contributions for retirement fund loans 5c. \$ 0.00 \$ 0.00 5c. Voluntary contributions for retirement fund fund for retirement fund fund fund fund fund fund fund fund | 5. L | .ist : | all payroll deductions: | | | | | | | | | |
| 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement plans 5c. Voluntary contributions for retirement fund loans 5c. Required repayments of retirement fund loans 5c. So. 0.00 \$ 0.00 5c. Insurance 5c. \$ 0.00 \$ 0.00 5c. Insurance 5 | | | • • | 5a | ì. | \$ | 1.020.0 | 0 | \$ | | 116.00 | ı |
| 5c. Voluntary contributions for retirement plans 5c. Required repayments of retirement fund loans 5d. Required repayments of retirement fund loans 5d. Required repayments of retirement fund loans 5d. Routired repayments of retirement fund loans 5d. Routired repayments of retirement fund loans 5d. Domestic support obligations 5d. Domestic support obligations 5d. Domestic support obligations 5d. Sol. Domestic | | | · · · · · · · · · · · · · · · · · · · | | | | • | _ | _ | | | _ |
| 5e. Insurance | 5 | ic. | Voluntary contributions for retirement plans | 5c | : . | \$ | | _ | \$ | | | _ |
| 5f. Domestic support obligations 5g. Union dues 5g. 0.000 \$ 0.000 5h. Other deductions. Specify: 5h. Other deductions. Specify: 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 1,020.00 \$ 116.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 3,963.00 \$ 539.00 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm. Attach a statement for each property and from operating a business, profession, or farm. Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ 0.00 8e. Social Security 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. \$pecify: 8g. Pension or retirement income 8g. \$ 0.00 \$ 0.00 8h. Other monthly income. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ 0.00 9h. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9 \$ 1,955.00 \$ 0.00 9h. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 10. Calculate monthly income. Add lines 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmaried partner, members of your household, your dependents, your roommates, and other friends or relatives. 10. Do you expect an increase or decrease within the year after you file this form? 12. Add the amount in the last column of line 10 to the amount in line 1 | 5 | id. | Required repayments of retirement fund loans | 5d | i. | \$ | 0.0 | 0 | \$_ | | 0.00 | _ |
| 5g. Union dues 5h. Other deductions. Specify: 5h. Other deductions. Specify: 5h. Other deductions. Specify: 5h. Other deductions. Specify: 5h. Other deductions. Add lines 5a+5b+5c+5d+5c+5f+5g+5h. 6. \$1,020.00 \$1116.00 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$3,963.00 \$539.00 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$0.00 \$0.00 8e. Social Security 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 8h. \$0.00 \$0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$1,955.00 \$0.00 Add all other income. Add lines 8a-18b+8c+8d+8e+8f+8g+8h. 9. \$1,955.00 \$0.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you workehold, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: Specify: Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it is 6,457.00 Combined monthly income. 10. Do you exp | 5 | e. | | | | · | 0.0 | 0 | | | 0.00 | |
| 5h. Other deductions. Specify: 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 1,020.00 \$ 116. | | | | | | · | | _ | · · — | | | _ |
| 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 1,020.00 \$ 116.00 \$ 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 3,963.00 \$ 539. | | - | | - | , | · | | _ | | | | _ |
| 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. O.00 \$ 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (hendits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 1,955.00 \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 1,955.00 \$ 0.00 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. +\$ 539.00 \$ 6,457.0 12. Add the animary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 14. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 15. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Mrite that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies | | | | _ | | · — | | _ | | | | _ |
| 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ 0.00 8d. Unemployment compensation 8d. \$ 0.00 \$ 0.00 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ 0.00 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9 \$ 1,955.00 \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9 \$ 1,955.00 \$ 0.00 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 2 Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies No. | | | . , | | | · — | | _ | · – | | | _ |
| 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 \$ 0.00 8d. \$ 0.00 \$ 0.00 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. \$ 0.00 \$ 0.00 8h. Other monthly income. Specify: 8d. \$ 0.00 \$ 0.00 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 1,955.00 \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 1,955.00 \$ 0.00 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. \$ 4 Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 6.457.00 Combined monthly income. | 7. C | Calc | ulate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$ | 3,963.0 | 0_ | \$_ | | 539.00 | _ |
| 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. Unemployment compensation 8d. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ 0.00 8g. Pension or retirement income 8g. \$ 0.00 \$ 0.00 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ 0.00 9. Add all other income. Add line 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 1,955.00 \$ 0.00 9. Add all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. 4\$ 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies No. | | | Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | 8a | 1. | \$ | 1.955.0 | n | \$ | | 0.00 | |
| 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. \$ 0.00 \$ 0.00 8e. Social Security 8e. \$ 0.00 \$ 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ 0.00 8g. Pension or retirement income 8g. \$ 0.00 \$ 0.00 8h. Other monthly income. Specify: 8t. \$ 0.00 \$ 0.00 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 1,955.00 \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 1,955.00 \$ 0.00 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies to you expect an increase or decrease within the year after you file this form? | 8 | ßb. | | | | · | | _ | _ | | | _ |
| 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ 0.00 8g. Pension or retirement income 8g. \$ 0.00 \$ 0.00 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 1,955.00 \$ 0.00 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.0 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined monthly income. No. | 8 | Sc. | regularly receive Include alimony, spousal support, child support, maintenance, divorce | | ; . | \$ | 0.0 | 0 | \$ | | 0.00 | _ |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8f. \$ 0.00 \$ 0.00 8g. Pension or retirement income 8g. \$ 0.00 \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 1,955.00 \$ 0.00 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies No. | 8 | ßd. | Unemployment compensation | 8d | l. | \$ | | _ | \$ | | 0.00 | |
| Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 8h. \$ 0.00 \$ 0.00 8h. \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 1,955.00 \$ 0.00 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 10. \$ 5,918.00 + \$ 539.00 = \$ 6,457.00 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. 4\$ 0.0 Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies No. | 8 | ße. | Social Security | 8e |) . | \$ | 0.0 | 0 | \$_ | | 0.00 | _ |
| 8h. Other monthly income. Specify: 8h. + \$ 0.00 + \$ 0.00 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 1,955.00 \$ 0.00 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined monthly income. No. | | | Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | | · | | _ | | | | _ |
| 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 1,955.00 \$ 0.00 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined monthly income. 13. Do you expect an increase or decrease within the year after you file this form? | | - | | | , | · | | | | | | _ |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.0 Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 6,457.0 Combined monthly income. No. | 8 | sn. | Other monthly income. Specify: | _ 8n | 1.+ | > | 0.0 | <u>U</u> + | · | | 0.00 | _ |
| Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.0 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined monthly income. 13. Do you expect an increase or decrease within the year after you file this form? | 9. A | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | . | 1,955.0 | 0 | \$_ | | 0.0 | 0 |
| Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. +\$ 0.0 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined monthly income. 13. Do you expect an increase or decrease within the year after you file this form? | 10 (| `alc | ulate monthly income Add line 7 ± line 9 | 10 | \$ | 5 | 018 00 ± | \$ | | 530 00 | - \$ | 6 457 00 |
| State all other regular contributions to the expenses that you list in <i>Schedule J</i>. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i>. Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules</i> and <i>Statistical Summary of Certain Liabilities</i> and Related <i>Data</i>, if it applies 13. Do you expect an increase or decrease within the year after you file this form? No. | | | | 10. | Ψ_ | J, | ,910.00 | Ψ_ | | 339.00 | - ^{\Pi} - | 0,437.00 |
| Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. \$ 6,457.0 Combined monthly income. 13. Do you expect an increase or decrease within the year after you file this form? No. | 11. S | State nclue other Do ne | e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a | depe | | | | , | | Schedule | | 0.00 |
| 13. Do you expect an increase or decrease within the year after you file this form? ■ No. monthly income | V | Vrite | that amount on the Summary of Schedules and Statistical Summary of Certai | | | | | | | | | 6,457.00 |
| _ : | 13. E | 0о у | • | ? | | | | | | | | |
| | _ | | No. | | | | | | | | | |

Official Form 106l Schedule I: Your Income page 2

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| | n this informe | tion to identify yo | our caca: | | | l | | |
|-------|--------------------------------|--|------------------------|--|--|-----------------|------------------------------------|-------------------------------|
| | | | | | | | | |
| Debt | tor 1 | Rafael Orozo | 0 | | | | c if this is: An amended filing | |
| Debt | | | | | | <i>F</i> | A supplement show | ving postpetition chapter |
| (Spo | ouse, if filing) | | | | | 1 | 13 expenses as of | the following date: |
| Unite | ed States Bankr | uptcy Court for the | : SOUTH | IERN DISTRICT OF NEW | YORK | <u></u> | MM / DD / YYYY | |
| | e number nown) | | | | | | | |
| Of | ficial Fo | rm 106J | | | | | | |
| Sc | chedule | J: Your | Exper | nses | | | | 12/15 |
| Be a | as complete a | and accurate as | possible eded, atta | . If two married people a ich another sheet to this | | | | |
| Part | 1: Descr Is this a joir | ibe Your House | hold | | | | | |
| ١. | No. Go to | | | | | | | |
| | | | in a separ | ate household? | | | | |
| | □N | 0 | • | | | | | |
| | □ Ye | es. Debtor 2 mus | st file Offic | ial Form 106J-2, <i>Expense</i> s | s for Separate House | ehold of Debto | or 2. | |
| 2. | Do you have | e dependents? | □ No | | | | | |
| | Do not list Debtor 2. | ebtor 1 and | Yes. | Fill out this information for each dependent | Dependent's relat Debtor 1 or Debto | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | □ No |
| | dependents | names. | | | Son | | 25 | Yes |
| | | | | | | | | □ No □ Yes |
| | | | | | | | | □ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No |
| 3. | Do your ove | enses include | _ | i | | | | ☐ Yes |
| ٥. | | f people other t | han _ | No | | | | |
| | yourself and | d your depende | nts? └ | Yes | | | | |
| Part | | ate Your Ongoi | | | | | | |
| exp | | | | uptcy filing date unless y sy is filed. If this is a supp | | | | |
| | | | | government assistance | | | | |
| | value of such icial Form 10 | | d have in | cluded it on Schedule I: | Your Income | | Your exp | enses |
| (0 | 10.0.1 | , | | | | | · | |
| 4. | | or home owners and any rent for the | | ses for your residence. I or lot. | nclude first mortgag | e 4. \$ | | 3,467.00 |
| | If not includ | led in line 4: | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. \$ | | 0.00 |
| | | rty, homeowner's | s, or renter | 's insurance | | 4b. \$ | | 0.00 |
| | | | | upkeep expenses | | 4c. \$ | | 50.00 |
| 5. | | owner's associat | | dominium dues our residence , such as ho | ome equity loons | 4d. \$ 5. \$ | | 0.00 |
| J. | Auditional | nongaye payin | enta iui y | our residence, such as no | nne equity loans | э. ф | | 0.00 |

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| Debtor 1 | Rafael O | rozco | Case num | nber (if known) | | | | |
|-------------------------|---|--|-------------|-----------------|----------|--|--|--|
| 2 | ition. | | | | | | | |
| 6. Util i 6a. | ities: | heat, natural gas | 6a. | ¢ | 250.00 | | | |
| 6b. | | ver, garbage collection | 6b. | · | 100.00 | | | |
| | | e, cell phone, Internet, satellite, and cable services | | · : ———— | | | | |
| 6c. | • | | 6c. | · - | 180.00 | | | |
| 6d. | | ecify: Cell Phone | 6d. | · - | 50.00 | | | |
| | | ekeeping supplies | 7. | · | 650.00 | | | |
| Chi | Idcare and c | hildren's education costs | 8. | · | 0.00 | | | |
| | - | ry, and dry cleaning | 9. | \$ | 150.00 | | | |
| . Per | sonal care p | roducts and services | 10. | \$ | 50.00 | | | |
| . Med | dical and de | ntal expenses | 11. | \$ | 110.00 | | | |
| | | Include gas, maintenance, bus or train fare. | 40 | | 400.00 | | | |
| | not include ca | | 12. | * | 480.00 | | | |
| | | clubs, recreation, newspapers, magazines, and books | 13. | | 50.00 | | | |
| . Cha | aritable cont | ributions and religious donations | 14. | \$ | 30.00 | | | |
| | urance. | | | | | | | |
| | | surance deducted from your pay or included in lines 4 or 20. | 4- | • | | | | |
| | . Life insura | | 15a. | · | 0.00 | | | |
| | . Health ins | | 15b. | · | 0.00 | | | |
| 15c | . Vehicle ins | surance | 15c. | \$ | 175.00 | | | |
| 15d | Other insu | rance. Specify: | 15d. | \$ | 0.00 | | | |
| | | clude taxes deducted from your pay or included in lines 4 or 20. | | | | | | |
| | ecify: | | 16. | \$ | 0.00 | | | |
| | | ease payments: | | | | | | |
| 17a | Car payme | ents for Vehicle 1 | 17a. | \$ | 0.00 | | | |
| 17b | . Car payme | ents for Vehicle 2 | 17b. | \$ | 0.00 | | | |
| 17c | . Other. Spe | ecify: | 17c. | \$ | 0.00 | | | |
| 17d | l. Other. Spe | ecify: | 17d. | \$ | 0.00 | | | |
| 3. Yo u | ır payments | of alimony, maintenance, and support that you did not report as | <u> </u> | | | | | |
| | | your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | \$ | 0.00 | | | |
|). O th | er payments | you make to support others who do not live with you. | | \$ | 0.00 | | | |
| Spe | ecify: | | 19. | | | | | |
| . Oth | er real prop | erty expenses not included in lines 4 or 5 of this form or on Sche | edule I: Yo | our Income. | | | | |
| 20a | Mortgages | on other property | 20a. | \$ | 0.00 | | | |
| 20b | . Real estat | e taxes | 20b. | \$ | 0.00 | | | |
| 20c | . Property, h | nomeowner's, or renter's insurance | 20c. | \$ | 0.00 | | | |
| 20d | l. Maintenan | ce, repair, and upkeep expenses | 20d. | \$ | 0.00 | | | |
| | | er's association or condominium dues | 20e. | \$ | 0.00 | | | |
| | er: Specify: | Toy Pron | | +\$ | 20.00 | | | |
| | | Tax Fiep | | +\$ | 5.00 | | | |
| | stage | thday/Presents | | +\$ | | | | |
| Chi | ristmas/Bir | tnday/Presents | | +\$ | 50.00 | | | |
| . Cal | culate your i | monthly expenses | | | | | | |
| | . Add lines 4 | | | \$ | 5,867.00 | | | |
| | | 2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | | | | |
| | | a and 22b. The result is your monthly expenses. | | \$ | 5,867.00 | | | |
| 220 | . Add IIIC 226 | and 22b. The result is your monthly expenses. | | Ψ | 3,807.00 | | | |
| B. Cal | culate your i | monthly net income. | | | | | | |
| 23a | . Copy line | 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 6,457.00 | | | |
| | | monthly expenses from line 22c above. | 23b. | -\$ | 5,867.00 | | | |
| | | | | | | | | |
| 23c | . Subtract v | our monthly expenses from your monthly income. | | | | | | |
| | | is your monthly net income. | 23c. | \$ | 590.00 | | | |
| | | | | | | | | |
| For | Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of modification to the terms of your mortgage? | | | | | | | |
| I | | , 55 | | | | | | |
| | | Fundain have | | | | | | |
| _ ⊔ \ | Yes. | Explain here: | | | | | | |

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| Fill in this | s information to identify your | case: | | | |
|------------------------------|--|--------------------------|-----------------------------|---------------------------|--|
| Debtor 1 | Rafael Orozco | | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, fili | ling) First Name | Middle Name | Last Name | | |
| | 3, | | | | |
| United Sta | ates Bankruptcy Court for the: | SOUTHERN DISTRICT | OF NEW YORK | | |
| Case num | nber | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | · | | amended filing |
| | | | | | |
| Official | Form 106Dec | | | | |
| | | ا میداد دادی دا | Dalataria Ca | la a di ila a | |
| Decia | aration About a | <u>ın individual</u> | Deptor's 5c | neaules | 12/15 |
| | Sign Below | | | | |
| Did y | you pay or agree to pay some | one who is NOT an atto | rney to help you fill out b | ankruptcy forms? | |
| | No | | | | |
| _ | | | | Attack Daylows | (a. Da ('t'a a Daan a na da Ma ('a a |
| | Yes. Name of person | | | | tcy Petition Preparer's Notice, d Signature (Official Form 119) |
| | | | | 200.0.0.0.0., 0 | z eignatare (Cinetari eini i ie) |
| | er penalty of perjury, I declare hey are true and correct. | that I have read the sum | mary and schedules filed | d with this declaration a | nd |
| Χ /« | s/ Rafael Orozco | | X | | |
| | Rafael Orozco | | Signature of I | Debtor 2 | |
| | Signature of Debtor 1 | | - 5 | | |
| ח | Date November 27, 2019 | | Date | | |
| | 140 Veiliber 21, 2013 | | | | |

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| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before I. What is your current marital status? Married Not married | | | | | | | | | | | |
|--|---------|---|----------------------------------|---------------------------------|---------------------------------|---------------------------------|-----------------------|--|--|--|--|
| Debtor 2 [Secouse it Siring) First Name Middle Name Last Name United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK Class number if strown) Class number If strown and the state of th | Fill i | n this inforn | nation to identify you | r case: | | | | | | | |
| Debtor 2 Sources filling Fist Name Middle Name Last Name | Debt | tor 1 | | Middle Neme | Loot Nama | | | | | | |
| United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK Case number Check if this is an amended filing Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 36 as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number of Known). Answer every question. 27.11 Give Details About Your Marital Status and Where You Lived Before 1. What is your current marital status? 1. Married Not mar | Debt | tor 2 | First Name | Middle Name | Last Name | | | | | | |
| Case number Check if this is an amended filing Check if this is an amended filing | | | First Name | Middle Name | Last Name | | | | | | |
| Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 4/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct normation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before What is your current marital status? Married | Unite | ed States Bar | nkruptcy Court for the: | SOUTHERN DISTRICT O | OF NEW YORK | | | | | | |
| Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy 2/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. 2/27 Be Married Not marri | Case | e number | | | | | | | | | |
| Statement of Financial Affairs for Individuals Filing for Bankruptcy 37 as a complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. 38 Part 1: Give Details About Your Marital Status and Where You Lived Before 19 What is your current marital status? 10 Married 11 No | (if kno | wn) | | | | | | | | | |
| Statement of Financial Affairs for Individuals Filing for Bankruptcy 37 as a complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. 38 Part 1: Give Details About Your Marital Status and Where You Lived Before 19 What is your current marital status? 10 Married 11 No | | | | | | | Ç | | | | |
| Statement of Financial Affairs for Individuals Filing for Bankruptcy 3. Sea scomplete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. 3. What is your current marital status? 3. Married 3. No | Off | icial Fo | rm 107 | | | | | | | | |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (If known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before What is your current marital status? Married | | | | Affairs for Individ | duals Filing for B | ankruptcy | 4/19 | | | | |
| Information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Give Details About Your Marital Status and Where You Lived Before I. What is your current marital status? Married Not married No yes. List all of the places you lived anywhere other than where you live now? No yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 lived there No yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 2 lived there No yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income Doily you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No yes. Fill in the details. Debtor 1 Sources of income (before deductions and exclusions) Pobtor 2 Sources of income (Check all that apply. Cross income (before deductions and exclusions) Wages, commissions, bonuses, tips | | | | | | | plying correct | | | | |
| Part 1: Give Details About Your Marital Status and Where You Lived Before What is your current marital status? | nfor | mation. If m | ore space is needed, | attach a separate sheet to | | | | | | | |
| What is your current marital status? | | | , | | | | | | | | |
| Married Not married During the last 3 years, have you lived anywhere other than where you live now? No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 Dived there Debtor 2 Prior Address: Dates Debtor 2 Dived there Debtor 3 Prior Address: Dates Debtor 1 Dived there Debtor 4 Prior Address: Dates Debtor 2 Dived there Debtor 5 Prior Address: Dates Debtor 1 Dived there Debtor 6 Prior Address: Dates Debtor 1 Dived there Debtor 7 Prior Address: Dates Debtor 2 Dived there Dates Debtor 2 Dived there Dates Debtor 1 Dived there Debtor 1 Prior Address: Dates Debtor 2 Dived there Dates Debtor 1 Dates Debtor 1 Dates Debtor 2 Dived there Debtor 3 Dived there Debtor 4 Debtor 1 Debtor 1 Debtor 1 Debtor 1 Debtor 1 Debtor 2 Sources of income Check all that apply. Debtor 2 Debtor 2 Sources of income Check all that apply. Debtor 2 Debtor 2 Debtor 2 Debtor 3 Debtor 4 Debtor 4 Debtor 4 Debtor 4 Debtor 5 Debtor 6 Debtor 9 Debtor 9 Debtor 9 Debtor 1 Debtor 9 Deb | | | | | Lived Before | | | | | | |
| During the last 3 years, have you lived anywhere other than where you live now? No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 lived there lived there 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 1. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Sources of income Check all that apply. Gross income Check all that apply. Gross income Check all that apply. Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips | 1. ' | What is you | current marital statu | is? | | | | | | | |
| During the last 3 years, have you lived anywhere other than where you live now? No | | Married | | | | | | | | | |
| No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. Debtor 1 Prior Address: Dates Debtor 1 lived there B. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.) No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income Check all that apply. Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips | | □ Not mar | ried | | | | | | | | |
| Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 Debtor 2 Prior Address: Dates Debtor 2 Debtor 2 Prior Address: Dates Debtor 2 Debtor 2 Debtor 2 Prior Address: Dates Debtor 2 Debtor 3 Debtor 3 Debtor 4 Debtor 4 Debtor 5 Debtor 5 Debtor 6 Debtor 6 Debtor 6 Debtor 6 Debtor 6 Debtor 7 Debtor 7 Debtor 7 Debtor 8 Debtor 8 Debtor 9 | 2. | Ouring the last 3 years, have you lived anywhere other than where you live now? | | | | | | | | | |
| Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 Debtor 3 Debtor 2 Debtor 4 Debtor 2 Debtor 4 Debtor 5 Debtor 5 Debtor 6 Debtor 6 Debtor 7 Debtor 6 Debtor 7 Debtor 7 Debtor 8 Debtor 9 Debto | | ■ No | | | | | | | | | |
| lived there | | ☐ Yes. Lis | t all of the places you l | ived in the last 3 years. Do no | ot include where you live now | <i>'</i> . | | | | | |
| No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. No No Yes. Fill in the details. Debtor 1 Sources of income (before deductions and exclusions) Check all that apply. Gross income (before deductions and exclusions) Wages, commissions, bonuses, tips \$87,381.00 Wages, commissions, bonuses, tips | | Debtor 1 Pr | ior Address: | | Debtor 2 Prior Ad | dress: | | | | | |
| No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 1. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) For last calendar year: (January 1 to December 31, 2018) Wages, commissions, bonuses, tips \$87,381.00 Wages, commissions, bonuses, tips | 3. | Within the la | ıst 8 years, did you ev | ver live with a spouse or leg | gal equivalent in a commun | ity property state or territory | ? (Community property | | | | |
| □ Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). Part 2 Explain the Sources of Your Income 1. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. □ No ■ Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) For last calendar year: (January 1 to December 31, 2018) Wages, commissions, bonuses, tips \$87,381.00 □ Wages, commissions, bonuses, tips | states | s and territori | es include Arizona, Ca | lifornia, Idaho, Louisiana, Ne | vada, New Mexico, Puerto Ri | co, Texas, Washington and W | /isconsin.) | | | | |
| Explain the Sources of Your Income 1. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No No Sources of income Check all that apply. For last calendar year: (January 1 to December 31, 2018) Explain the Sources of Your Income Gross and all businesses, including part-time activities. It is not yonce under Debtor 1. Debtor 1 Sources of income (before deductions and exclusions) For last calendar year: (January 1 to December 31, 2018) Wages, commissions, bonuses, tips | | No | | | | | | | | | |
| Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. For last calendar year: (January 1 to December 31, 2018) Diagram of the two previous calendar years or the two previous calendar years. Source or income Check all that apply. Wages, commissions, bonuses, tips Wages, commissions, bonuses, tips | | ☐ Yes. Ma | ike sure you fill out <i>Scl</i> | nedule H: Your Codebtors (Of | fficial Form 106H). | | | | | | |
| Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No No Pestor 1 Sources of income Check all that apply. For last calendar year: (January 1 to December 31, 2018) For last calendar year: (January 1 to December 31, 2018) For last calendar year: (January 1 to December 31, 2018) | Part | 2 Explai | n the Sources of You | r Income | | | | | | | |
| Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Pess. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) For last calendar year: (January 1 to December 31, 2018) Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. Best only once under Debtor 1. Debtor 2 Sources of income Check all that apply. Gross income (before deductions and exclusions) Wages, commissions, bonuses, tips | | • | | | | | | | | | |
| Yes. Fill in the details. Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) For last calendar year: (January 1 to December 31, 2018) Debtor 2 Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) Wages, commissions, bonuses, tips | 1 | Fill in the tota | l amount of income yo | u received from all jobs and a | all businesses, including part- | time activities. | ndar years? | | | | |
| Test calendar year: (January 1 to December 31, 2018) Debtor 1 Sources of income Check all that apply. Gross income (before deductions and exclusions) Sources of income (before deductions and exclusions) For last calendar year: (January 1 to December 31, 2018) Debtor 2 Sources of income (before deductions and exclusions) Gross income (before deductions and exclusions) Wages, commissions, bonuses, tips | | □ No | | | | | | | | | |
| Sources of income Check all that apply. Gross income (before deductions and exclusions) For last calendar year: (January 1 to December 31, 2018) Gross income (before deductions and exclusions) Wages, commissions, bonuses, tips \$87,381.00 Wages, commissions, bonuses, tips | | _ | in the details. | | | | | | | | |
| Sources of income Check all that apply. Gross income (before deductions and exclusions) For last calendar year: (January 1 to December 31, 2018) Gross income (before deductions and exclusions) Sources of income (before deductions and exclusions) Under the company of the | | | | Dahtan 4 | | Dahtan 0 | | | | | |
| Check all that apply. Check all that apply. (before deductions and exclusions) Check all that apply. Check all that apply. (before deductions and exclusions) For last calendar year: (January 1 to December 31, 2018) Wages, commissions, bonuses, tips \$87,381.00 Uwages, commissions, bonuses, tips | | | | | Gross income | | Gross income | | | | |
| (January 1 to December 31, 2018) - Wages, commissions, bonuses, tips - wages, commissions, bonuses, tips | | | | | (before deductions and | | (before deductions | | | | |
| | | | | | \$87,381.00 | | | | | | |
| | | | | • • | | ☐ Operating a business | | | | | |

Official Form 107

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| De | ebtor 1 Rafael Orozco | | | Pg 30 of 42 Case number (if known) | | | | | | | |
|----|--------------------------------|--|--|---|---|--|-----------------------------|---|--|--|--|
| | | | | Debtor 1 | | Debtor 2 | | | | | |
| | | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of inc Check all that a | | Gross income (before deductions and exclusions) | | | |
| | | ndar year be December | | ■ Wages, commissions, bonuses, tips | \$89,824.00 | ☐ Wages, commissions, bonuses, tips | | | | | |
| | | | | ☐ Operating a business | | ☐ Operating a | business | | | | |
| | Include in and other winnings. | come regard public bene If you are fil | dless of whet fit payments ing a joint ca | ne during this year or the two her that income is taxable. Exa pensions; rental income; intel se and you have income that your ome from each source separa | amples of other income are a rest; dividends; money collec you received together, list it o | alimony; child supp sted from lawsuits; only once under De | royalties; and ebtor 1. | | | | |
| | _ | . Fill in the de | etails. | | | | | | | | |
| | | | | Debtor 1 Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Debtor 2 Sources of inc Describe below | | Gross income (before deductions and exclusions) | | | |
| | □ No. | Neither Deindividual | ebtor 1 nor primarily for a 90 days bef Go to line List below paid that c | 2's debts primarily consumer Debtor 2 has primarily consumer a personal, family, or househo ore you filed for bankruptcy, di 7. each creditor to whom you pai reditor. Do not include payments a payments to an attorney for the | umer debts. Consumer debtald purpose." id you pay any creditor a total id a total of \$6,825* or more ints for domestic support oblig | al of \$6,825* or mo | re? vments and th | ne total amount you | | | |
| | Yes | Debtor 1 | to adjustmer | nt on 4/01/22 and every 3 year or both have primarily consu ore you filed for bankruptcy, di | s after that for cases filed on umer debts. | | | | | | |
| | | ■ No. | Go to line | 7. | | | | | | | |
| | | □ Yes | include pa | each creditor to whom you pai yments for domestic support o ir this bankruptcy case. | | | | | | | |
| | Creditor | 's Name an | d Address | Dates of payme | ent Total amount paid | Amount you still owe | Was this p | payment for | | | |
| | Insiders in of which y | nclude your i you are an of | relatives; any fficer, directo | r bankruptcy, did you make a general partners; relatives of r, person in control, or owner coroprietor. 11 U.S.C. § 101. Inc | any general partners; partners of 20% or more of their voting | erships of which yo g securities; and ar | u are a gene ny managing | ral partner; corporatio agent, including one f | | | |
| | ■ No | | | | | | | | | | |

Insider's Name and Address

☐ Yes. List all payments to an insider.

Dates of payment

Total amount paid

Amount you still owe

Reason for this payment

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Pg 31 of 42 Debtor 1 Rafael Orozco Case number (if known) Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Nο Yes. List all payments to an insider **Insider's Name and Address** Reason for this payment Dates of payment **Total amount** Amount you Include creditor's name paid still owe Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. ☐ No Yes. Fill in the details. Status of the case Case title Nature of the case Court or agency Case number RAFAEL OROZCO, HILDA **U.S. District Court** Bankruptcv □ Pending **OROZCO** vs Unknown Defendant Chapter 7 300 Quarropas St □ On appeal Case No.: 16-22763-rdd White Plains, NY 10601 □ Concluded Chapter 7 Bankruptcy Discharged - 0.00 State Of New York vs RAFAEL STATE TAX WESTCHESTER COUNTY □ Pending OROZCO, HILDA OROZCO **CLERK** WARRANT □ On appeal E037860515W0012 ☐ Concluded - 344.00 MTGLQ INVESTORS, L.P -against-**Foreclosure Supreme Court State of NY** Pending RAFAEL OROZCO, HILDA **County of Westchester** □ On appeal **OROZCO** 111 Dr Martin Luther King □ Concluded Index No: 58628/2018 Blvd White Plains, NY 10601 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Value of the **Describe the Property** Date property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a

court-appointed receiver, a custodian, or another official?

No

☐ Yes

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Pg 32 of 42 Case number (if known) Debtor 1 Rafael Orozco Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Value Dates you gave the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ No Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You Cushner & Associates, P.C. **Attorney Fees** \$2,810.00 399 Knollwood Road Suite 205 White Plains, NY 10603 todd@cushnerlegal.com **Debtor** 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.

Nο

Yes. Fill in the details.

Person Who Was Paid Description and value of any property Date payment Amount of **Address** transferred or transfer was payment made

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Debtor 1 Rafael Orozco Case number (if known)

| Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than proper transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. | | | | | | | | | | |
|--|---|--|-------------------|-----------------|---|---|--|--|--|--|
| | Person Who Received Transfer Address | Description and very property transfer | | | any property or s received or debts schange | Date transfer was made | | | | |
| | Person's relationship to you | | | | | | | | | |
| 19. | Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect No | | y property to a s | self-settled tr | ust or similar device o | f which you are a | | | | |
| | ☐ Yes. Fill in the details. | | | | | | | | | |
| | Name of trust | Description and v | alue of the prop | erty transfer | red | Date Transfer was made | | | | |
| Par | rt 8: List of Certain Financial Accounts, Instru | ıments, Safe Deposi | t Boxes, and Sto | rage Units | | | | | | |
| 20. | Within 1 year before you filed for bankruptcy, v sold, moved, or transferred? | vere any financial ac | counts or instru | ments held i | n your name, or for yo | ur benefit, closed, | | | | |
| | Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. | | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | | |
| | Name of Financial Institution and La | Last 4 digits of account number Type of account instrument | | cle | ate account was osed, sold, oved, or | Last balance before closing or transfer | | | | |
| | | | | | ansferred | | | | | |
| 21. | Do you now have, or did you have within 1 yea cash, or other valuables? | r before you filed for | bankruptcy, an | y safe deposi | it box or other deposit | ory for securities, | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, S State and ZIP Code) | | Describe the | Do you still have it? | | | | | |
| 22. | Have you stored property in a storage unit or p | place other than your | home within 1 y | ear before y | ou filed for bankruptcy | ? | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | | |
| | | Who also has as I | | Dagariha tha | aantanta | De veu etill | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or I to it? Address (Number, S State and ZIP Code) | | Describe the | contents | Do you still have it? | | | | |
| Par | rt 9: Identify Property You Hold or Control for | Someone Else | | | | | | | | |
| 23. | Do you hold or control any property that some for someone. | one else owns? Incl | ude any property | / you borrow | ed from, are storing fo | r, or hold in trust | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the prop (Number, Street, City, S Code) | | Describe the | property | Value | | | | |
| Par | rt 10: Give Details About Environmental Inform | nation | | | | | | | | |
| or | the purpose of Part 10, the following definitions | s apply: | | | | | | | | |
| | Environmental law means any federal state of | r local statute or requ | ulation concerni | na pollution | contamination release | es of hazardous or | | | | |

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

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Debtor 1 Rafael Orozco Case number (if known)

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

| | hazardous material, pollutant, contaminant, or | similar term. | | | | | | | | | |
|-----|--|---|--------------------|--|--------------------|--|--|--|--|--|--|
| Rep | ort all notices, releases, and proceedings that y | you know about, regardless of when | n they | y occurred. | | | | | | | |
| 24. | Has any governmental unit notified you that yo | ou may be liable or potentially liable | e unde | er or in violation of an environme | ntal law? | | | | | | |
| | ■ No | | | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State an ZIP Code) | | Environmental law, if you know it | Date of notice | | | | | | |
| 25. | Have you notified any governmental unit of any release of hazardous material? | | | | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State an ZIP Code) | | Environmental law, if you know it | Date of notice | | | | | | |
| 26. | Have you been a party in any judicial or admin | Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. | | | | | | | | | |
| | ■ No | | | | | | | | | | |
| | ☐ Yes. Fill in the details. | | | | | | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | | Status of the case | | | | | | |
| Par | t 11: Give Details About Your Business or Co | nnections to Any Business | | | | | | | | | |
| 27. | Within 4 years before you filed for bankruptcy, | , did you own a business or have ar | ny of t | the following connections to any | business? | | | | | | |
| | ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | | | | | | | |
| | ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) | | | | | | | | | | |
| | ☐ A partner in a partnership | | | | | | | | | | |
| | ☐ An officer, director, or managing exect | utive of a corporation | | | | | | | | | |
| | ☐ An owner of at least 5% of the voting o | or equity securities of a corporation | Ì | | | | | | | | |
| | ■ No. None of the above applies. Go to Par | t 12. | | | | | | | | | |
| | ☐ Yes. Check all that apply above and fill in | the details below for each business | s. | | | | | | | | |
| | Business Name D Address | escribe the nature of the business | | Employer Identification number Do not include Social Security n | umber or ITIN | | | | | | |
| | | ame of accountant or bookkeeper | | | | | | | | | |
| 28. | Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. | | | | | | | | | | |
| | ■ No | | | | | | | | | | |
| | Yes. Fill in the details below. | ata lasua d | | | | | | | | | |
| | Name Address (Number, Street, City, State and ZIP Code) | | | | | | | | | | |
| Des | 449. Cian Balaw | | | | | | | | | | |

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 6 19-24079-shl Doc 1 Filed 11/27/19 Entered 11/27/19 15:38:57 Main Document Pg 35 of 42

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee | | |
|---|-------|--------------------|--|--|
| + | \$75 | administrative fee | | |
| | \$275 | total fee | | |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. 19-24079-shl Doc 1 Filed 11/27/19 Entered 11/27/19 15:38:57 Main Document Pg 40 of 42

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of New York

| In re | Rafael Orozco | | Case No. | | |
|-------|--|--|----------------------------|-----------------------------------|-----|
| | | Debtor(s) | Chapter | 13 | |
| | DISCLOSURE OF COMPE | ENSATION OF ATTOI | RNEY FOR DE | EBTOR(S) | |
| cc | ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 ompensation paid to me within one year before the filie rendered on behalf of the debtor(s) in contemplation | ing of the petition in bankruptcy, | , or agreed to be paid | to me, for services rendered or | to |
| | For legal services, I have agreed to accept | | \$ <u></u> | 5,810.00 | |
| | Prior to the filing of this statement I have received | | \$ | 2,810.00 | |
| | Balance Due | | | 3,000.00 | |
| 2. TI | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 3. Tl | The source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. | I have not agreed to share the above-disclosed com | pensation with any other person | unless they are mem | bers and associates of my law fi | rm. |
| | ☐ I have agreed to share the above-disclosed compensor copy of the agreement, together with a list of the national control of the same copy of the agreement. | | | | 1 |
| | | CERTIFICATION | | | |
| | certify that the foregoing is a complete statement of an unkruptcy proceeding. | ny agreement or arrangement for | payment to me for r | epresentation of the debtor(s) in | |
| No | ovember 27, 2019 | /s/ Todd S. Cushi | ner | | |
| Date | | Todd S. Cushner Signature of Attorne Cushner & Assoc 399 Knollwood R Suite 205 | ey ciates, P.C. coad | | |
| | | White Plains, NY (914) 600-5502 F todd@cushnerle | ax: (914) 600-554 | 4 | |

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United States Bankruptcy Court Southern District of New York

| In re | Rafael Orozco | Debtor(s) | Case No. Chapter | 13 |
|--------|---|--|-----------------------|-----------------------|
| | VERIFIC | ATION OF CREDITO | R MATRIX | |
| The ab | ove-named Debtor hereby verifies that the | attached list of creditors is true and | d correct to the best | of his/her knowledge. |
| Date: | November 27, 2019 | /s/ Rafael Orozco | | |

Signature of Debtor

MABT - GENESIS RETAIL ATTN: BANKRUPTCY PO BOX 4477 BEAVERTON, OR 97076

MCCABE WEISBERG CONWAY 145 HUGENOT STREET SUITE 2010 NEW ROCHELLE, NY 10801

MTGLQ C/O MCABE WEISBERG & CONWAY LLC 145 HUGUENOT ST , SUITE 210 NEW ROCHELLE, NY 10801

SHELLPOINT MORTGAGE PO BOX 740039 CINCINNATI, OH 45274-0826